

PART B - FEE(S) TRANSMITTAL

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21186

7590

12/16/2005

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03/10/2006 EAYALEW2 00000085 10789890

01 FC:1501 1400.00 OP
02 FC:1504 300.00 OP
03 FC:0001 9.00 OP

| APPLICATION NO. | FILING DATE | FIRST NAMED INVENTOR | ATTORNEY DOCKET NO. | CONFIRMATION NO. |
|-----------------|-------------|-------------------------|---------------------|------------------|
| 10789,890 | 02/27/2004 | Klaus Florian Schuegraf | 303.278US2 | 9295 |

TITLE OF INVENTION: SELECTIVE SPACER TECHNOLOGY TO PREVENT METAL OXIDE FORMATION DURING POLYCIDIC REOXIDATION

| APPLN. TYPE | SMALL ENTITY | ISSUE FEE | PUBLICATION FEE | TOTAL FEE(S) DUE | DATE DUE |
|----------------|--------------|-----------|-----------------|------------------|------------|
| nonprovisional | NO | \$1400 | \$300 | \$1700 | 03/16/2006 |

| EXAMINER | ART UNIT | CLASS-SUBCLASS |
|-------------|----------|----------------|
| LEE, CALVIN | 2818 | 438-595000 |

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).

☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.

☒ "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.

2. For printing on the patent front page, list

(1) the names of up to 3 registered patent attorneys or agents OR, alternatively,

(2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

1 Schwegman, Lundberg,
2 Woessner & Kluth, P.A.
3

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

MICRON TECHNOLOGY, INC.

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

BOISE, IDAHO

Please check the appropriate assignee category or categories (will not be printed on the patent): ☐ Individual ☒ Corporation or other private group entity ☐ Government

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- ☒ Issue Fee
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☒ Advance Order - # of Copies 3

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☒ The Director is hereby authorized by charge the required fee(s), or credit any overpayment, to Deposit Account Number 14-0143 (enclose an extra copy of this form).

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☐ a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27.☐ b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).

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Authorized Signature

Date

Typed or printed name TIMOTHY B. CLISE

Registration No. 40,957

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